



**Testimony of Ingrid Gillespie, President of the Connecticut Prevention Network
and Executive Director of Communities 4 Action**
concerning funding for Regional Action Councils in

**H.B. No. 5044 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR THE
FISCAL YEAR ENDING JUNE 30, 2017.**

*Department of Mental Health & Addiction Services- Regional Action Council Funding
February 18, 2016 Appropriations Subcommittee on Health Public Hearing*

Senator Bye, Representative Walker, Senator Gerratana, Representative Dillon and members of the Appropriations subcommittee, my name is Ingrid Gillespie and I am President of the Connecticut Prevention Network. I am offering testimony in strong opposition to the proposed cuts to the regional action councils.

The **Connecticut Prevention Network (CPN)** is an association of the state's 13 community partnership **Regional Action Councils (RACs)** that work to provide every community in the state with education, training, and advocacy for substance abuse prevention and related community concerns such as behavioral health, violence, gambling, drunk driving, prescription drugs and illicit opioid abuse and suicide. We are recognized as highly effective, community-based partnerships operating on average of a 1-2 paid staff team and many, many volunteers.

The need for prevention continues to grow, especially in light of the opioid crisis affecting communities across Connecticut. Some of Connecticut Prevention Network's opioid abuse prevention and harm reduction initiatives include:

- Continuing to support the medication drop box program where unwanted medications are safely disposed of and not accessible for potential abuse. In 2010, CPN in partnership with the Connecticut Department of Consumer Protection, developed and implemented the medication drop box pilot in 4 communities. Today, 55 communities have a medication drop box and the number is growing. In 2015, 23,541 pounds of unwanted medications were collected.
- Providing medical grand round trainings on opioid addiction and use of brief screening tools.
- Hosting 20+ community forums on opioid abuse and misuse. These forums have been catalysts for communities to take action at the local level and have informed state level initiatives.
- Presentations on prescription medication abuse to over 3000 adults and students
- Training more than 500 people in the use of naran
- Active partner on many collaboratives that address the opioid crisis across the continuum of prevention, intervention, treatment and recovery

Connecticut Prevention Network also focuses on suicide prevention and mental health promotion. To date CPN members have trained close to 10,000 youth and adults in QPR (Question, Persuade, Refer), an evidence-based gatekeeper suicide prevention training.

These initiatives are a very small representation of *what* we do. *How* we do our work includes:

- Building relationships with key community leaders to affect change
- Providing capacity building support to local prevention councils in over 150 towns.
- Effectively, mobilizing at the local and regional level. Because of our many relationships, we are able to quickly bring together people around an issue. An example of this is the town hall and call-to-action forums addressing opioid abuse.
- Using data-driven assessment, planning, implementation and evaluation processes that address local conditions and align with federal indicators to measure progress. This has resulted in:
 - Producing needs assessment used to inform state application for federal funds and to identify and address priority areas at the regional and local levels.
 - Collectively procuring over \$11 million in federal, private and local funding for use at the sub-regional and municipal level AND more than \$850,000 in in-kind donations per year during the past 4 years.
- Together with the Regional Mental Health Boards, biannual regional assessment of mental health and addiction services. This report and participation in the DMHAS planning council are required in the state application for federal funding of \$23 million.

The efficacy of our network allows us to do our work more effectively. We have an internal communication and capacity building system that allows us to:

- Actively participate as CPN on over 13 state-level task forces and committees
- More effectively use our collective expertise and resources within our regions
- Develop pilots that can be implemented state wide e.g. medication drop boxes and SBIRT (screening and early intervention initiatives)
- Successfully advocate for prevention legislation e.g. banning of sale of powdered alcohol
- Enhance local efforts to implement state policies. For example, ensuring local pharmacists and prescribers are aware of narcan and addiction training. This is related to Public Act 15-198 An Act Concerning Substance Abuse and Opioid Overdose Prevention.

So *why* is our work important? Consider:

- 90 percent of Americans who meet the medical criteria for addiction started smoking, drinking, or using other drugs before age 18. (Source: National Center of Addiction and Substance Abuse-CASA)
- Connecticut spends 16.7% of its budget addressing the negative consequences of substance abuse and addiction. The costs are primarily in health care, judicial and education systems (Source: CASA)
- “For every dollar invested in prevention, \$10 is saved in societal costs.” (Source: Community Prevention Initiative: Power of Prevention) Therefore, if the budget by the proposed \$736,000 this will decimate the CPN infrastructure and ultimately cost Connecticut an additional \$7.36 million in long term costs. As a supporter of fiscal responsibility, CPN urges you to reconsider this budget cut and support a prevention infrastructure that is presently saving dollars and producing revenue.

Thank you for your time and attention.

Ingrid Gillespie
 Communities4Action
 680 Main Street, Suite 204
 Stamford, CT 06902
 Ph: 203-588-0457